

Broome County



Youth Bureau

REQUEST FOR PROPOSALS
2016

New York State Office of Children & Family Services
Youth Development Delinquency Prevention Programs (YDDP)

* Please note that portions of this application must be electronically submitted.

DEADLINE: **Thursday, March 10, 2016 @ 4:00 PM**

ISSUED BY:

Broome County Youth Bureau
PO Box 1766, 60 Hawley St.
Binghamton, NY 13902

**Broome County Youth Bureau
2016 Request for Proposals**

The Broome County Youth Bureau Advisory Board is inviting proposals from not-for-profit organizations to provide services, opportunities and supports for youth under the age of 21 within our community. Successful applicants will be those that address the youth development priorities identified in the New York State Touchstones. Programs will be funded for a one year period contingent upon availability of state funds and legislative approval.

Youth Development (YD) Touchstones

 <http://ccf.ny.gov/council-initiatives/touchstones/>

ELIGIBILITY

Eligible applicants will be not-for-profit incorporated organizations able to deliver successful programming that meets the needs of youth as identified in this request for proposal.

FUNDING PERIOD

Services delivered between *January 1, 2016 and December 31, 2016* may receive funds offered in this RFP. Successful applicants will be awarded a one year contract, consideration for future contracts are contingent upon successful program performance. Applicants should be aware they will have to re-qualify for funding for any future funds. Renewal is not automatic or guaranteed.

AVAILABLE FUNDS

All funding under this Broome County RFP is executory to the extent of monies made available to the Office of Children and Family Services from the State of New York, and no liability on account thereof shall be incurred by the Office of Children and Family Services, the State of New York or Broome County, beyond monies available for such purposes.

Due to limited funding from the Office of Children & Family Services the Youth Bureau will consider proposals requesting funds for direct service opportunities and/or supports to youth prior to proposals for indirect services.

Funds in this category can be used for programs proposing to provide services that will have a community-wide impact on the lives of young people. This year the Youth Bureau is offering funding applications in two categories. Requests under \$5,000 may use the EZ forms, those in excess of \$5,000 must use the process described in this package.

FUNDING AUTHORIZATION

Youth Develop funding is authorized by Section 420 of the NYS Executive Law. The amount allocated to individual counties is determined based on a formula established by the State of New York.

CONTRACT PROCESS

Local agencies apply to Broome County for funds. The County subsequently enters into contract with the local agency. The County then applies to the NYS Office of Children and Family Services on behalf of agencies whose programs and requests have been recommended by the Youth Bureau Advisory Board and approved by the County Legislature and Executive.

CONTRACTOR QUALIFICATIONS

- Demonstrates a strong commitment to youth development principles. We require participation by program personnel in NYS Youth Advancing Youth Development training. See page 9 for more information.
- Demonstrable competency in the administration and operation of children and youth-specific programs.
- We strongly encourage the use of criminal background checks and child abuse clearances on any staff or volunteers having direct contact with program clients.
- Agency must be legally authorized to operate in NYS and have established administrative and program resources in Broome County.
- If agency is a covered entity under the Health Insurance Portability and Accountability Act (HIPAA) they must affirm being in compliance with all HIPAA requirements.
- Does not discriminate against nor deny services to any person on the grounds of race, color, religion, sex, sexual orientation, national origin, age, disability, citizenship, political affiliation, or belief.
- Complies with the 1990 Americans with Disabilities Act (ADA) where applicable. A County Safety Specialist may inspect program sites before a contract is awarded.
- Agrees that state and local monitors or auditors to ensure compliance with funding requirements may review provider facilities and relevant financial and performance records.
- Has or agrees to obtain a minimum of \$1,000,000 liability insurance.
- Agrees to submit all applicable New York State forms required by OCFS for funding. These include the Program Annual Assessment, Claim forms and supporting documents, by the deadlines established by the Broome County Department of Parks, Recreation and Youth Services.

- Demonstrates the ability to collect outcome data, which measures and evaluates program performance and success with clients.

REIMBURSEMENT

Agencies submit claims to the Youth Bureau for program expenses incurred during the reporting period. Programs using YD funds may submit quarterly claims reimbursing expenditures. Consequently, agencies must be prepared for “up-front” costs.

Additionally, funds are available only after the contract process is completed, which can take several months. The Youth Bureau understands that this places a burden on agencies and makes every effort to expedite this process.

ALLOWABLE USE OF FUNDS

These funds are to be used for programs serving youth between the ages of 0 – 21 years. Adult components of applicant programs will not be funded under any circumstances.

Administrative costs, including salary reimbursement for administrative staff who do not work directly with the young people in the program, should be limited to no more than 10% of each total grant request due to limited funding. No exceptions can be made. **If you have questions about administrative costs please contact us at 778-2193.

Funds may be used to help agencies pay for direct line staff, program supplies, space rentals and other operating costs to provide new or expanded services at NO COST TO PROGRAM PARTICIPANTS. Office supplies must indicate the type of supplies. “Program Supplies” is not an acceptable description. It must be further defined.

A Non-Reimbursable Costs Chart which lists items that are NOT eligible for reimbursement is provided in the application package. **Equipment such as copiers, computers, televisions, VCRs, printers, etc. will not be funded under this proposal.

CONTINUATION OF FUNDING

Continued funding at any percentage or dollar level shall not be automatic. Programs are funded for one year contingent upon successfully completing the claims process. Funding continuation for existing programs shall depend on available monies based on NYS OCFS State Aid, and the following:

- ❖ Relationship to current priorities documented within this RFP
- ❖ Measured and documented success in meeting project outcomes
- ❖ Program competence
- ❖ Fiscal needs and potential for alternate funding
- ❖ Fiscal and managerial competence
- ❖ Overall agency commitment and support of the program
- ❖ Sustainability of the program with other, non-government funds
- ❖ Evaluation & monitoring completed by the Youth Bureau.

YOUTH BUREAU ADVISORY BOARD ACTION

The Youth Bureau Advisory Board may take the following action regarding proposals: recommend, not recommend, or recommend as modified. In addition, Youth Bureau staff reserves the right to request that applicants revise program budgets based on available funding.

Approvals

In addition to the recommendation of the Director of Parks, Recreation and Youth Services, approval of the County Legislature and County Executive are obtained by the department prior to submission to the State of New York Office of Children and Family Services.

THE APPLICATION PROCESS

- STEP # 1** The completed application, both electronic and mailed portions, must be received by the Youth Bureau no later than 4:00 PM on Thursday, March 10, 2016.
- STEP # 2** **Some applicants may be requested to provide an oral presentation to the Youth Bureau Advisory Board.**
- STEP # 3** The Youth Bureau Advisory Board Program Committee studies proposals and makes recommendations to the full advisory board.
- STEP # 4** The Youth Bureau Advisory Board reviews the Program Committee's recommendations and then makes funding recommendations to the Director of Parks Recreation and Youth Services who has the final decision on what is forwarded to the Legislature.
- STEP # 5** The County Legislature reviews and votes on the funding recommendations. The County Executive signs the legislation.
- STEP # 6** All applications approved by the County Legislature are submitted to the New York State Office of Children and Family Services for final approval. The commissioner of OCFS reserves the right to make final decisions on all YD applications.
- STEP # 7** Broome County issues contracts to approved applicants.
- STEP # 8** The Director of Parks Recreation and Youth Services will announce the funding levels for 2016.

IMPORTANT

APPLICATION DEADLINE

All proposals must be submitted to the Youth Bureau no later than **4:00 PM on THURSDAY, March 10, 2016**. This refers to **both electronic and mailed portions** of the application package. There will be no exceptions.

- PAGE NUMBERS ARE REQUIRED.
- INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.
- AFTER FINAL APPROVAL AND REVISIONS, *OCFS FORMS* WILL BE MADE AVAILABLE TO QUALIFIED APPLICANTS.

INQUIRIES

Additional inquiries concerning this RFP should be made in writing to:

Arthur Garrison
Director

Broome County Parks, Recreation & Youth Services
PO Box 1766, 60 Hawley St.
Binghamton NY 13902

E-mail: agarrison@co.broome.ny.us
Phone – 607-778-2193

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2016
NYS OFFICE OF CHILDREN & FAMILY SERVICES
YOUTH BUREAU FUNDING APPLICATION

COVER / SIGNATURE PAGE

(this page must include an original signature and be submitted by mail)

Name of Program: _____

Sponsoring Agency: _____

Agency Address: _____

Contact Person /Title: _____

Telephone Number: _____

Youth Development

Requested Amount:

***Requests less than \$5,000 should use the EZ Form**

Will you accept less than your request for this project? ☐ **Yes** ☐ **No**

If you won't accept less than your request, please explain why. If you will accept less than requested, please describe specifically how your project would be modified and at what point you would be unable to administer the program due to inadequate funding.

I certify that the information presented in this proposal is true and correct and that all projected costs are reasonable and necessary for the operation of the proposed services and not a duplication of funds already available or which will be available from other funds.

Signature of the Chief Executive Officer

Date

NEW YORK STATE OFFICE OF CHILDREN AND FAMILY SERVICES
BROOME COUNTY YOUTH BUREAU --- REQUEST FOR PROPOSAL

Application Instructions : Please complete the following objectives in 15 pages or less using no less than a 12 point font and ½ inch margins. If you wish to add attachments, include these at the end of the final proposal labeled Appendix. Each appendix section should be clearly labeled as it is referenced in the proposal. Required charts and appendixes will not be counted as part of the 15 page total.

PROGRAM ABSTRACT/SUMMARY

Please provide a one page (or less) summary of the project description with reference to the funding request. This should be page 1 of your application. This should include the following:

- Name of program and sponsoring agency
- Amount of funding request
- Need or priority you are addressing
- Target population, including the approximate number of young people you plan to serve
- Intended results or outcomes
- Type(s) of services, opportunities or support you are providing

VISION STATEMENT

What is the ideal end-state that the program is striving to achieve for program participants?

- a.) Using the NYS Touchstones as a reference, please state your vision for the young people you serve including life areas, goals and objectives. You are not required to address every Touchstone. The NYS Touchstones can be found on the Council on Children & Families website at <http://ccf.ny.gov/council-initiatives/touchstones/>

DESCRIPTION OF THE TARGET POPULATION

The target population is the specific group of people who will directly interact with the program staff. Generally, they have a need, condition or behavior that the program is intends to improve or change. Please describe:

- a.) Characteristics (including number to be served, their age, geographic location, gender, race/ethnicity, economic status, and other special attributes).

- b.) Conditions and Behaviors of the target population that the program seeks to change, eliminate or enhance.
- c.) Typical Program Participant Profile – Describe a typical individual/family for whom the program is targeted and for whom success will be most likely.
- d.) Provide evidence that the proposed program, if funded, would attract the expected number of participants.
- e.) How did you arrive at your number of young people projected to be served for the program year?
- f.) Please give the estimated cost-per-young person for this program.

PROGRAM DESCRIPTION

Each program offers a particular service model consisting of the constellation of services, opportunities & support offered and how these are delivered to program participants (frequency, duration of services, core principles, delivery strategy, etc.) This is what the provider uses to achieve the identified outcome targets.

Please describe :

- a.) **Program Core Features** - Your program in terms of its core features. Please include the kinds of services, opportunities, and/or supports provided, their intensity and duration, its essential elements, delivery strategies, involvement of target population in planning, and comparative advantages of other program models.
- b.) **Youth Involvement** – Young people provide a valuable perspective from which adults are often removed. By participating in planning and decision-making, youth can gain leadership skills and feelings of greater commitment for this program and their community.

How will young people be involved in program planning, service design and decision-making?

- c.) **Service Coordination** - Collaboration is an important tool in providing optimal services to young people in our community. Please identify your formal service linkages to other community groups, agencies, institutions, etc. that are integral components of the service design. In addition, please address how these linkages will support your outcomes. (For example, provision of specific services, off-hour coverage, joint programming, case coordination, etc. Attach provision of service agreements if applicable.)
- d.) **Project Workplan** - Please detail the steps necessary for the development and implementation of the program.
- e.) Please describe the process used to discharge or terminate young people from the program.

NEED STATEMENT

- a.) What are the community needs that these services, opportunities and/or supports will address? Please include relevant data and research to document these community needs.
- b.) How does your program propose to address these needs?
- c.) If other programs like yours currently exist, why is your program necessary?

PARTICIPANT OUTCOMES

This Request for Proposal continues our commitment to the value of outcomes at the Broome County Youth Bureau, which was originally implemented several years ago. Outcome measurement shifts the focus from activities to results, from how a program operates to the change that it creates in individuals and communities. The Youth Bureau Advisory Board appreciates the time and attention taken by local agencies to develop an outcome measurement system which reflects the real benefits to program participants.

Using the attached Outcomes Chart please identify two or more program outcomes for your target population and the indicators used to track any progress toward your outcomes. These should relate to your vision statement above.

ORGANIZATIONAL QUALIFICATIONS

- a.) What are the qualifications of your agency and staff to address these programs.
- b.) Briefly describe programs the agency or proposed staff have operated in the past. You may also wish to attach, quote from and/or cite evaluation reports, or annual reports. Statements from young people of your services, opportunities and/or supports, local experts or other credible sources could also be cited.

In addition: Please attach a copy of your agency's most recent financial audit and a current agency budget that is no more than two pages in length. Additionally, if your agency publishes an annual report, please include it. The above items may be mailed if they are not available electronically.

PROGRAM PERSONNEL

This section refers to the program personnel in the organization who are primarily responsible for providing the identified services, opportunities and/or supports and reaching the outcomes of the identified program.

- a.) Please complete a *Personnel: Job Description Chart* Be sure to include resumes of existing staff that will be working with this program.

VOLUNTEERS/INTERNS

- a.) Please describe how volunteers and/or interns will fit into the proposed program.
- b.) Describe the agency's capacity to implement the described service model and attain the defined outcome.

EVALUATION METHODS

- a.) Programs occasionally need to be modified during implementation. Describe the methods used to assess how your agency will evaluate your program activities.
- b.) In addition, please document whether or not your program utilizes an evidence-based, nationally recognized program model. If not, how was your program model developed and by whom?

AGENCY MISSION AND PAST ACCOMPLISHMENTS

- a.) Briefly describe the agency's mission and past accomplishments in providing services to the targeted population.
- b.) Describe the agency's capacity to implement the described service model and attain the defined outcomes.
- c.) Briefly cite the evidence for community support of this program.
- d.) Describe your agency's commitment and support for this program.

SELF MONITORING

- a.) Describe your agency's internal oversight/accountability mechanisms.
- b.) Describe how the program activities are monitored or reviewed by the board of directors, agency management and/or consumers.

PROGRAM ORGANIZATIONAL CHART

Please submit an organizational chart for the proposed program (not the entire organization) to provide a picture of the program's structure. In designing an organizational chart, the central concepts to keep in mind are, who supervises whom, and who reports to whom. The chart should give an accurate picture of the areas of responsibility and how you manage them within your program.

BOARD OF DIRECTORS

The membership of a Board of Directors helps illustrate a base of community support. Private non-profit organizations must have a Board of Directors as outlined in New York State's Non-Profit Charter laws.

- a.) Please attach a ***Board of Directors Chart*** to list members of the Board including name, relevant professional or community affiliations and either home or professional address. Be sure to indicate with an asterisk any youth (under age 21) that is a member of your board.
- b.) Please include a paragraph in your program description section about the Board of Director's role with respect to this program. State whether the Board will be involved in establishing the program design and/or reviewing the proposal prior to submission.
- c.) Also, please note whether or not board members will be involved in monitoring or evaluating the proposed program and how often they will visit the program.

MISCELLANEOUS

- a.) If relevant to your program design, please also describe the site where the proposed program will be implemented. Please include the features that will enhance your ability to operate this program. Be sure to include any safety, security and health features.
- b.) If applicable, please describe any special equipment that will be needed by the program and the nature of its use.
- c.) Transportation issues have become an obstacle faced by many programs. Describe your program's accessibility by public transportation. Also describe any transportation services that your program will provide directly or indirectly.
- d.) Please state the overall hours of operation and the daily schedule. In addition, please indicate the exact time periods when any of the program activities will be suspended during the contract period (e.g., staff vacations, recruitment/planning phases, staff training, school vacations, holidays, program phase down, etc.).

**Please note:* Unless specified in this section, it will be assumed that the program activities will be conducted for the entire duration of the contract period for the schedule described above.

EFFORTS TO OBTAIN FUNDS FROM ALTERNATIVE SOURCES

- a.) Using an *Other Revenue Sources Chart*, please document your efforts and successes to secure other funding sources for this program.
- b.) How will this program be sustained on a long-term basis if government funds are reduced or eliminated?

Application Deadline and Submittal Instructions

The deadline for this application is Thursday, **March 10, 2016**. No exceptions will be made.

****Please pay special attention to which parts of the application must be submitted electronically and which parts must be submitted by mail. Refer to the checklist on page 16.**

Electronic portions of the application should be sent in Microsoft Word and Microsoft Excel as attachments to agarrison@co.broome.ny.us. Please type **2016 YD Application** in the subject line of your email message.

APPLICATION NARRATIVE

Please make sure the order of your narrative follows the order in this RFP.

APPLICATION ATTACHMENTS/FORMS

Please make sure you download the *OCFS-3107 Program Budget Form* from the OCFS website.

Youth Bureau Budget Application Worksheet
Service Methods Summary
Personnel: Job Descriptions
Personnel: Time/Funds Allocated to Program
Other Revenue Sources
Volunteers/Interns
Board of Directors

Other attachments required:

- Copy of agency's most recent financial audit
- Organizational budget (no more than 2 pages)
- Agency annual report

- Current job descriptions for all staff whose salaries you are proposing to utilize any portion of these funds
- Copy of IRS 501c3 Letter of Determination

The above referenced items may be mailed if not available electronically but must still be received by the Youth Bureau on the application deadline.

Application Checklist

Format :

- ☐ Narrative Does Not Exceed the 15 Page Limit (excluding charts, budget forms, and appendixes)
- ☐ 12 Point Font and ½ Margins Requirement Met

Required Items To Be Sent Electronically

Budget:

- ☐ Youth Bureau Budget Application Form
- ☐ NYS OCFS Budget Form 3107
- ☐ Administration Expenses Does Not Exceed 10% of Total Request

Narrative:

- ☐ Program Abstract/Summary
- ☐ Vision Statement
- ☐ Target Population Description
- ☐ Program Description
- ☐ Need Statement
- ☐ Participant Outcomes
- ☐ Organizational Qualifications
- ☐ Program Personnel
- ☐ Evaluation Methods
- ☐ Agency Mission and Past Accomplishments
- ☐ Self-Monitoring
- ☐ Organizational Chart
- ☐ Role of Board of Directors
- ☐ Role of Volunteers/Interns
- ☐ Efforts to Obtain Funding from other Alternative Sources
- ☐ Outcomes Chart

Attachments:

- ☐ Service Methods Summary
- ☐ Personnel: Job Descriptions
- ☐ Personnel: Time/Funds Allocated to Program
- ☐ Other Revenue Sources
- ☐ Volunteers/Interns (if applicable)
- ☐ Board of Directors

Items That May Be Submitted Electronically OR By Mail:

- ☐ Current Job Descriptions
- ☐ Organizational Budget (no more than 2 pages)
- ☐ Most Recent Financial Audit
- ☐ Copy of IRS 501c3 Letter of Determination
- ☐ Agency Annual Report

Required Attachments To Be Sent By Mail:

- ☐ Signature/Cover Page Signed by Chief Executive Officer

Participant Outcomes

Using the attached chart, please identify two or more outcomes for your target population and provide more than one indicator for each outcome.

Outcomes - The actual impacts/benefits/changes for participants that occur as a result of your program efforts during and/or after their participation in your program.

Indicators - These are observable and measurable behaviors, shift in attitudes, etc. toward an outcome; they would indicate to you whether you're making any progress toward your outcome.

Example:

Outcome	Indicator	Data Source	Data Collection Method
Increased responsibility	Program attendance	Attendance records	Sign-in sheets

OUTCOMES CHART

List Program Outcomes	List Indicators for Outcomes	Data Sources for Each Indicator	Data Collection Method